

APR 2 6 2002

510(k) Summary Information:

Device Manufacturer:

Dade MicroScan Inc.

Contact name:

Cynthia Van Duker, Regulatory Affairs Manager

Fax:

916-374-3144

Date prepared:

February 19, 2002

Product Name:

Microdilution Minimum Inhibitory Concentration (MIC) Panels

Trade Name:

MicroScan® MICroSTREP plus™ Panel

Intended Use:

To determine bacterial susceptibility to Levofloxacin

Indication for Use

For determining antimicrobic susceptibility with aerobic streptococci, including

Streptococcus pneumoniae

Predicate device:

MicroScan® Streptococcus MIC Panel (K963641).

510(k) Summary:

The MicroScan® MICroSTREP plus™ Panel is used to determine quantitative and/or qualitative antimicrobial agent susceptibility of colonies grown on solid media of aerobic streptococci, including *Streptococcus pneumoniae*. After inoculation, panels are incubated for 20 – 24 hours at 35°C +/- 1°C in a non-CO2 incubator, and read visually according to the Package Insert.

The antimicrobial susceptibility tests are miniaturizations of the broth dilution susceptibility test. Various antimicrobial agents are diluted in water, buffer or minute concentrations of broth to concentrations bridging the range of clinical interest. Panels are rehydrated with 115 µl Mueller-Hinton broth supplemented with 2-5% lysed horse blood (LHB) and buffered with 50 mM HEPES, after inoculation of the broth with a standardized suspension of the organism in saline. After incubation in a non-CO₂ incubator for 20-24 hours, the minimum inhibitory concentration (MIC) for the test organism is manually read by observing the lowest antimicrobial concentration showing inhibition of growth.

The proposed MicroScan® MICroSTREP plus™ Panel demonstrated substantially equivalent performance with streptococcal isolates when compared with an NCCLS frozen Reference Panel, as defined in the FDA DRAFT document "Guidance on Review Criteria for Assessment of Antimicrobial Susceptibility Devices", dated March 8, 2000.

The Premarket Notification (510[k]) presents data in support of the new MICroSTREP *plus*™ Panel with Levofloxacin.

The external evaluation was conducted with fresh and stock Efficacy isolates and stock Challenge strains. The external evaluations were designed to confirm the acceptability of the proposed MICroSTREP plusTM Panel by comparing its performance with an NCCLS frozen Reference panel. The MICroSTREP plusTM Panel demonstrated acceptable performance with an overall Essential Agreement of >99% for Levofloxacin when compared with the frozen Reference panel.

Reproducibility testing demonstrated acceptable reproducibility and precision with Levofloxacin.

Quality Control testing demonstrated acceptable results for Levofloxacin.

DEPARTMENT OF HEALTH & HUMAN SERVICES



Food and Drug Administration 2098 Gaither Road Rockville MD 20850

APR 2 6 2002

Ms. Cynthia Van Duker Regulatory Affairs Manager Dade Behring Inc. 1584 Enterprise Boulevard West Sacramento, CA 95691

Re: k020556

Trade/Device Name: MicroScan® MICroSTREP plusTM Panels with Levofloxacin

 $0.12-16\mu g/ml$

Regulation Number: 21 CFR 866.1640

Regulation Name: Antimicrobial Susceptibility Test Powder

Regulatory Class: Class II

Product Code: JWY

Dated: February 19, 2002 Received: February 20, 2002

Dear Ms. Van Duker:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4588. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours,

Steven I. Gutman, M.D., M.B.A.

Director

Division of Clinical Laboratory Devices

Steven Butman

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

Indication for Use Statement

510(k) No.:

14020556

(To be assigned by FDA)

Device Name:

MicroScan® MICroSTREP plus Panel

Intended Use

To determine bacterial antimicrobial agent susceptibility

Indications for Use:

The MicroScan® MICroSTREP plus™ Panel is used to determine quantitative and/or qualitative antimicrobial agent susceptibility of colonies grown on solid media of aerobic streptococci, including *Streptococcus pneumoniae*. After inoculation, panels are incubated for 20 – 24 hours at 35°C +/- 1°C in a non-CO2 incubator, and read visually according to the Package Insert.

This particular submission is for the addition of the antimicrobial Levofloxacin at concentrations of 0.12 to 16 mcg/ml to the test panel

The organisms which may be used for Levofloxacin susceptibility testing in this panel are;

Streptococcus pneumoniae (including penicillin-resistant strains)

Streptococcus pyogenes

Streptococcus (Group C/F)

Streptococcus (Group G)

Streptococcus agalactiae

Viridans group streptococci

Division Sign-Off)

Division of Clinical Laboratory Devices

510(k) Number <u>KOQ</u> 053-7

x For Prescription Use Only